PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

appropriate. All nimer (correspondence including the delay of the de	io the Patent advance of	a) specifying a new con	rrespondence	ce fees will address; ar	be ma nd/or (l	ailed to the current of b) indicating a separ	ould be completed where correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block for any change of address)					The A certificate of mailing can only be used for domestic mailings of the Feels, Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own car ficate of mailing or transmission.				
DARBY & DARBY, PC P.O. BOX 5257 NEW YORK, NY 10150-5257					Certify ate of Mailing or Transmission I hereby certify that this Fee(s, Transmittal is being deposited with the United States Postal Service with sufficient sostage for first class mail in an envelope addressed to the Mail Stop ISSUE PSE address above, or being facsimile transmitted to the USPTO (571) 273-2885, but the date indicated below.				
								(Depositor's name)	
]	(Signature)							
			L	Via EFS	<u> </u>	_		(10)	
APPLICATION NO. FILING DATE		FIRST NAMED INVENT		OR ATTORNEY DOCKET NO.			IEY DOCKET NO.	CONFIRMATION NO.	
09/823,946 03/30/2001			Catherine Bahn		20643/0204973-US0			7596	
TELEVISION		METHOD TO PROVID	-		- <u>-</u>				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	JE PREV.P	AID ISSUE F	EE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional NO		\$1400	\$ 0	_	\$ 0	\$1400		01/16/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS						
BUI, KIEU	OANH T	2623	725-060000						
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up or agents OR, altern (2) the name of a si registered attorney of 2 registered patent a	the names of up to 3 registered patent attorneys gents OR, alternatively, the name of a single firm (having as a member a stered attorney or agent) and the names of up to gistered patent attorneys or agents. If no name is ad, no name will be printed. I Darby & Darby PC 2 M. David Ream 3					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Digeo, Inc. Kirkland, Washington									
Please check the appropri	ate assignee category or	categories (will not be pr	rinted on the patent):	☐ Individu	al 🔼 Corp	oration	or other private gro	up entity Government	
4a. The following fee(s) a Sissue Fee Publication Fee (N Advance Order - #	. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form FFC-2036 is attached. ☐ The Director is hereby authorized to charge the overpayment, to Deposit Account Number								
5. Change in Entity Stat	tus (from status indicated	d above)							
	s SMALL ENTITY state		b. Applicant is no						
NOTE: The Issue Fee and interest as shown by the r	d Publication Fee (if requeecords of the United Sta	uired) will not be accepte ites Patent and Trademark	d from anyone other that Office.	an the applic	ant; a registe	red att	omey or agent; or the	e assignee or other party in	
Authorized Signature M. David Ream				Date	Dece	embe	r 4, 2006		
Typed or printed name		Registration No. 35,333							
This collection of inform an application. Confident submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria Virginia 223	I application form to the ons for reducing this bu irginia 22313-1450. DC	CFR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the DNOT SEND FEES OR	on is required to obtain 1.14. This collection is depending upon the ir the Chief Information Of COMPLETED FORMS	or retain a be estimated to dividual cas ficer, U.S. P S TO THIS	enefit by the take 12 min e. Any com- atent and Tr. ADDRESS. S	public nutes to ments of ademai SEND	which is to file (and o complete, including on the amount of tin rk Office, U.S. Depa TO: Commissioner f	by the USPTO to process) g gathering, preparing, and the you require to complete rument of Commerce, P.O. for Patents, P.O. Box 1450,	

PTOL-85 (Rev. 07/06) Approved for use through 04/30/2007.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.